Case 18-15853 Doc 1 Filed 06/01/18 Entered 06/01/18 11:37:11 Desc Main Document Page 1 of 55

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	't 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your	e the name that is on government-issued	Maria First name	First name
	exar	ure identification (for mple, your driver's use or passport).	Teresa	At the constant
	Bring	g your picture	Middle name Ayala	Middle name
		tification to your ting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ude your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer utification number	xxx-xx-7860	

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Case number (if known)

Debtor 1 Maria Teresa Ayala

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	7033 Lowell Dr. Carpentersville, IL 60110 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Kane County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Document Case number (if known) Debtor 1 Maria Teresa Ayala

ar	Tell the Court About	Your Baı	nkruptcy Ca	ise						
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 Chapter 11								
	choosing to file under									
		□ Chapter 12								
		☐ Cha	apter 13							
3.	How you will pay the fee	a	bout how yo	ou may pay. Typically, if yo attorney is submitting you	u are paying	the fee yourself	f, you may pay with cash	r local court for more details n, cashier's check, or money n a credit card or check with		
		_			•	e this option, sig	n and attach the <i>Applica</i>	ation for Individuals to Pay		
			•	ee in Installments (Official F I t mv fee be waived (You	,	this option only	if you are filing for Char	oter 7. By law, a judge may,		
		_ b	ut is not requipplies to you	uired to, waive your fee, ar	nd may do so unable to pay	only if your inc the fee in insta	ome is less than 150% of allments). If you choose to	of the official poverty line that this option, you must fill out		
).	Have you filed for bankruptcy within the last 8 years?	□ No. ■ Yes.								
	last o years.	_ 103	District	Northern Illinois	When	8/07/08	Case number	08-20684		
			District	MOTUTO IIIIIIOIS	When	0/01/00	Case number	00 20004		
			District		When		Case number			
10.	Are any bankruptcy	■ No								
	cases pending or being filed by a spouse who is	☐ Yes								
	not filing this case with you, or by a business partner, or by an affiliate?									
			Debtor	-			Relationship to y	/ou		
			District		When		Case number, if	known		
			Debtor				Relationship to y			
			District		When		Case number, if	known		
11.	Do you rent your residence?	■ No.	Go to I	ine 12.						
		☐ Yes	Has yo	our landlord obtained an ev	riction judgme	ent against you?	?			
				No. Go to line 12.						
				Yes. Fill out <i>Initial Statem</i> this bankruptcy petition.	ent About an	Eviction Judgn	nent Against You (Form	101A) and file it as part of		

Deb	otor 1 Maria Teresa Aya	la		Document Page 4 of 55 Case number (if known)		
Par	t 3: Report About Any Bu	ısinesses	You Own	a as a Sole Proprietor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	e and location of business		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State & ZIP Code		
	it to this petition.		Chec	k the appropriate box to describe your business:		
				Health Care Business (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as defined in 11 U.S.C. § 101(53A))		
				Commodity Broker (as defined in 11 U.S.C. § 101(6))		
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set a deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, st operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the in 11 U.S.C. 1116(1)(B).				
	For a definition of amall	■ No.	I am r	not filing under Chapter 11.		
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code	iling under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am f	iling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	· Have Any	/ Hazardo	ous Property or Any Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat					
	of imminent and identifiable hazard to public health or safety?	☐ Yes.	What is	the hazard?		
	Or do you own any property that needs immediate attention?			diate attention is why is it needed?		

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

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Debtor 1 Maria Teresa Ayala

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Maria Teresa Aya	a	Document	Paye 0 01	Case number (if	known)
Part	6: Answer These Quest	ions for Rep	oorting Purposes			
16.	What kind of debts do you have?		Are your debts primarily cons			in 11 U.S.C. § 101(8) as "incurred by an
		I	☐ No. Go to line 16b.			
		ı	Yes. Go to line 17.			
			Are your debts primarily busing noney for a business or investment.			
		I	☐ No. Go to line 16c.			
		I	☐ Yes. Go to line 17.			
		16c. S	State the type of debts you owe	that are not consume	er debts or business d	ebts
17.	Are you filing under Chapter 7?	□ No. I	am not filing under Chapter 7.	Go to line 18.		
	Do you estimate that after any exempt property is excluded and		am filing under Chapter 7. Do yare paid that funds will be availa			is excluded and administrative expenses
	administrative expenses are paid that funds will	I	No			
	be available for distribution to unsecured creditors?	I	□Yes			
18.	How many Creditors do	1 -49		□ 1,000-5,000		□ 25,001-50,000
	you estimate that you owe?	□ 50-99		☐ 5001-10,000		☐ 50,001-100,000
		☐ 100-199 ☐ 200-999		1 0,001-25,000)	☐ More than100,000
19.	How much do you	\$ 0 - \$50	0,000	□ \$1,000,001 - \$	S10 million	□ \$500,000,001 - \$1 billion
	estimate your assets to be worth?	□ \$50,001	- \$100,000	\$10,000,001 -		\$1,000,000,001 - \$10 billion
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$50,000,001 - □ \$100,000,001		☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
20.	How much do you	\$0 - \$50),000	□ \$1,000,001 - \$		□ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		1 - \$100,000	□ \$10,000,001 - □ \$50,000,001 -		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion
		— φ.ου,ου. φουυ,ουυ		☐ \$50,000,001 - ☐ \$100,000,001		☐ More than \$50 billion
		Δ φοσο,σο	, i with the second sec		•	<u> </u>
Part	· ·					
For	you	I have exa	mined this petition, and I declare	e under penalty of per	rjury that the informati	on provided is true and correct.
			osen to file under Chapter 7, I at tes Code. I understand the relie			der Chapter 7, 11,12, or 13 of title 11, se to proceed under Chapter 7.
			ey represents me and I did not I have obtained and read the n			attorney to help me fill out this
		I request re	elief in accordance with the chap	pter of title 11, United	States Code, specifie	ed in this petition.
		bankruptcy and 3571.	case can result in fines up to \$			roperty by fraud in connection with a s, or both. 18 U.S.C. §§ 152, 1341, 1519,
			Teresa Ayala [·] esa Ayala		Signature of Debtor 2	
		Signature of			Signature of Debtol 2	
		Executed of	June 1, 2018 MM / DD / YYYY	E	Executed on	ID / VVVV
			IVIIVI / UU / Y Y Y Y		IVIIVI / D	D/YYYY

Debtor 1 Maria Teresa Ayala Document Page 7 of 55 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ James A. Young	Date	June 1, 2018
Signature of Attorney for Debtor	•	MM / DD / YYYY
James A. Young 6217342		
Printed name		
James A. Young Law		
Firm name		
85 Market Street		
Elgin, IL 60123		
Number, Street, City, State & ZIP Code		
Contact phone 847-793-1031	Email address	sarai@jamesyounglaw.com
6217342 IL		
Bar number & State		

		DOCUM	eni Paue 8 oi 55)	
Fill in this inforr	mation to identify your	case:			
Debtor 1	Maria Teresa Aya	la			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number _					
(if known)					☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	c	
	»	0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$	13,223.00
1c. Copy line 63, Total of all property on Schedule A/B	\$	13,223.00
2: Summarize Your Liabilities		
		abilities you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	15,709.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	22,859.90
Your total liabilities	\$	38,568.90
Summarize Your Income and Expenses		
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	0.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,773.00
4: Answer These Questions for Administrative and Statistical Records		
Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your	r other sch	edules.
■ Yes What kind of debt do you have?		
	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D \$

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Maria Teresa Ayala Document Page 9 of 55
Case number (if known)

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

\$_____0.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total claim	
Troill I alt 4 on Schedule L/I, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Debtor 1 Maria Teresa Ayala First Name Middle Name Last Name Description of the Company of	□ Check if amended	
First Name Middle Name Last Name Debtor 2 Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Difficial Form 106A/B Schedule A/B: Property The each category, separately list and describe items. List an asset only once. If an asset fits inink it fits best. Be as complete and accurate as possible. If two married people are filing to	_ = = = = = = = = = = = = = = = = = = =	
Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Official Form 106A/B Schedule A/B: Property each category, separately list and describe items. List an asset only once. If an asset fits ink it fits best. Be as complete and accurate as possible. If two married people are filing to	_ = = = = = = = = = = = = = = = = = = =	
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Official Form 106A/B Schedule A/B: Property Leach category, separately list and describe items. List an asset only once. If an asset fits link it fits best. Be as complete and accurate as possible. If two married people are filing to	_ = = = = = = = = = = = = = = = = = = =	
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each category, separately list and describe items. List an asset only once. If an asset fits ink it fits best. Be as complete and accurate as possible. If two married people are filing to		12/15
Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Do you own or have any legal or equitable interest in any residence, building, land, or simple No. Go to Part 2. Yes. Where is the property? Part 2: Describe Your Vehicles You own, lease, or have legal or equitable interest in any vehicles, whether the omeone else drives. If you lease a vehicle, also report it on Schedule G: Executory Co. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles	milar property? ney are registered or not? Include any vehicles you ow	n that
□ No ■ Yes		
3.1 Make: Nissan Who has an interest in the property?	the amount of any secured claims on Sch	edule D:
Model: Sentra Debtor 1 only	Check one	edule D:
Model: Sentra	the amount of any secured claims on Sch Creditors Who Have Claims Secured by F	edule D: Property.
Model: Sentra	the amount of any secured claims on Sch Creditors Who Have Claims Secured by F Current value of the entire property? Current value of the portion you of	edule D: Property.
Model: Sentra	the amount of any secured claims on Sch Creditors Who Have Claims Secured by F Current value of the entire property? Current value of the portion you of the characteristics.	edule D: Property.
Model: Sentra Year: 2014 Approximate mileage: 55,000 Other information: Fair Condition Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth (see instructions) Check if this is community propertions (see instructions)	the amount of any secured claims on Sch Creditors Who Have Claims Secured by F Current value of the entire property? Current value of the portion you of the portion you of the portion you of the entire property? Type State on the portion of the portion you of the property? Check one Do not deduct secured claims or exemption the amount of any secured claims on Sch	edule D: Property. e of the own? 5,644.00
Model: Sentra Year: 2014 Approximate mileage: 55,000 Other information: Fair Condition Check if this is community propert (see instructions) Make: Nissan Model: Altima Debtor 1 only Debtor 2 only At least one of the debtors and anoth (see instructions)	the amount of any secured claims on Sch Creditors Who Have Claims Secured by F Current value of the entire property? Current value of the portion you of the portion you of the entire property? State of the portion you of the portion you of the manual of any secured claims or exemption the amount of any secured claims on Sch Creditors Who Have Claims Secured by F	edule D: Property. e of the bwn? 5,644.00 ons. Put edule D: Property.
Model: Sentra Year: 2014 Approximate mileage: 55,000 Other information: Fair Condition Check if this is community propert (see instructions) 3.2 Make: Nissan Model: Altima Debtor 1 only Debtor 2 only At least one of the debtors and anoth (see instructions)	the amount of any secured claims on Sch Creditors Who Have Claims Secured by F Current value of the entire property? Current value of the portion you of the portion you of the portion you of the entire property? Type State on the portion of the portion you of the property? Check one Do not deduct secured claims or exemption the amount of any secured claims on Sch	edule D: Property. e of the own? 5,644.00 ons. Put edule D: Property.
Model: Sentra Year: 2014 Approximate mileage: 55,000 Other information: Fair Condition Check if this is community propert (see instructions) 3.2 Make: Nissan Model: Altima Year: 2013 Debtor 1 only Check if this is community propert (see instructions)	the amount of any secured claims on Sch Creditors Who Have Claims Secured by F Current value of the entire property? Check one Do not deduct secured claims or exemption the amount of any secured claims on Sch Creditors Who Have Claims Secured by F Current value of the entire property? Current value of the entire property? Current value of the portion you of the control you of the control you of the entire property?	edule D: Property. e of the own? 5,644.00 ons. Put edule D: Property.

Official Form 106A/B Schedule A/B: Property page 1

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Case number (if known) Document Debtor 1 Maria Teresa Ayala 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$11,538.00 pages you have attached for Part 2. Write that number here...... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No ■ Yes. Describe..... Misc. Household Goods \$525.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$315.00 Misc. Electronics 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles □ No Yes. Describe..... \$200.00 Misc. Art Prints & Books 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ☐ No ■ Yes. Describe..... \$115.00 Misc. Sporting Equipment & Bicycle 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$415.00 Misc. Clothing & Apparel

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

□ No

Yes. Describe.....

Misc. Costume Jewelry \$100.00

		Case 18-1	15853	Doc 1	Filed 06/01/18	Entered 06/01/18 11:37:1	1 Desc Main
De	btor 1	Maria Teresa	a Ayala		Document	Page 12 of 55 Case number (if kno	wn)
	<i>Exam</i> ■ No	arm animals ples: Dogs, cats, b	birds, horse	es			
	■ No	Give specific info		-	i did not aiready list, i	ncluding any health aids you did not lis	t
15					om Part 3, including a	ny entries for pages you have attached	\$1,670.00
Pa	rt 4: De	escribe Your Finance	cial Assets				
				uitable intere	est in any of the follov	ving?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	ples: Money you h	•			osit box, and on hand when you file your p	etition
	<i>Exam</i> µ □ No	institutions.			I accounts; certificates ounts with the same ins		ge houses, and other similar
	Yes				ii istitutioi i	iaiiie.	
	100						
	100		17.1.	Checking	BMO Har	ris	\$15.00
18.	Bonds Examp	s, mutual funds, o	or publicly	r traded stoc			\$15.00
18.	Bonds Examp		or publicly investmen	r traded stoc	ks th brokerage firms, mo		\$15.00
18.	Bonds Examp No □ Yes Non-point v	ples: Bond funds,	or publicly investmen	rtraded stoo t accounts wi	ks th brokerage firms, mod		<u> </u>
18.	Bonds Examp No Yes Non-pr joint v No	ples: Bond funds,	or publicly investmen Ir ock and in	r traded stoc it accounts wi institution or is interests in in	ks th brokerage firms, mod suer name: corporated and uninc	ney market accounts	<u> </u>
18.	Bonds Examp No Yes Non-pi joint v No Yes Roveri Negoti Non-n	ublicly traded stoventure Give specific info	or publicly investment ock and in Name orate bond include pe	r traded stock traccounts with accounts with astitution or is atterests in in bout them e of entity: Is and other arsonal checks	th brokerage firms, more suer name: corporated and uninc	ney market accounts orporated businesses, including an inte	<u> </u>
18.	Bonds Examp No Yes Non-pi joint v No Yes Roveri Negoti Non-n No	ublicly traded stoventure Give specific info	or publicly investment or and in Name orate bond include perents are the ormation abormation abormation abormation abormation abormation abore prize p	r traded stock t accounts with activation or is atterests in in bout them e of entity: ds and other rsonal check- ose you cann	th brokerage firms, more suer name: corporated and uninc	ney market accounts orporated businesses, including an inte % of ownership: egotiable instruments omissory notes, and money orders.	<u> </u>
118. 119. 220.	Bonds Examp No Yes Non-pi joint v No Yes Govern Negoti Non-n No Yes.	ublicly traded stoventure Give specific informment and corportiable instruments negotiable instruments megotiable instruments megotiable instruments or pension	or publicly investment ock and in Name orate bond include peents are the Issue accounts	r traded stock that accounts with astitution or is atterests in in bout them the of entity: this and other arrsonal check- tose you cannot bout them arr name:	ks th brokerage firms, more suer name: corporated and unince	ney market accounts orporated businesses, including an inte % of ownership: egotiable instruments omissory notes, and money orders.	erest in an LLC, partnership, and
18. 19. 20.	Bonds Examp No Yes Non-pr joint v No Yes. Retirer Examp No	ublicly traded stoventure Give specific informment and corportiable instruments negotiable instruments megotiable instruments megotiable instruments or pension	or publicly investment or and investment or and investment or and include peents are the ormation aborate bond include peents are the ormation aborate saccounts RA, ERISA	traded stock traceounts with accounts with accounts with accounts with accounts with account them the of entity: Is and other resonal check ose you cannot them are name: A, Keogh, 401	ks th brokerage firms, more suer name: corporated and unince	orporated businesses, including an interpretate businesses, including	erest in an LLC, partnership, and
18. 19. 20.	Bonds Examp No Yes Non-pi joint v No Yes. Govern Negoti Non-n No Yes. Retirer Examp No Yes. Securi Your s	ublicly traded stoventure Give specific information and corportiable instruments negotiable instruments negotiable instruments. Give specific information or pension ples: Interests in III	or publicly investment ock and in ormation all Name orate bond include peents are the ormation aborated accounts RA, ERISA t separatel Type of prepaymed deposits	traded stock traceounts with accounts with accounts with accounts with accounts with account them to of entity: Is and other account them are name: A, Keogh, 401 y, account: nts you have ma	th brokerage firms, more suer name: corporated and unince negotiable and non-nes, cashiers' checks, proport transfer to someone (k), 403(b), thrift saving linstitution in the south of t	orporated businesses, including an interpretate businesses, including	erest in an LLC, partnership, and

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Case number (if known) Document Debtor 1 Maria Teresa Ayala 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value. 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue □ No

Yes. Describe each claim.......

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Case number (if known)

Document Debtor 1 Maria Teresa Ayala

	Workers Comp Case #1 Maria Ayala vs Elgin In			Unknown
ı	Other contingent and unliquidated claims of every nature, inclu No Yes. Describe each claim	ding counterclaims o	of the debtor and rights to set of	f claims
35.	Any financial assets you did not already list			
I	No			
[☐ Yes. Give specific information			
36.	Add the dollar value of all of your entries from Part 4, includin for Part 4. Write that number here			\$15.00
Par	t 5: Describe Any Business-Related Property You Own or Have an Inter	est In. List any real esta	ite in Part 1.	
37.	Do you own or have any legal or equitable interest in any business-relate	ed property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Par	t 6: Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46.	Do you own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
	No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Par	Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
_	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership	?		
_	■ No □ Yes. Give specific information			
	Tes. Give specific illiornation			
54.	Add the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Par	t 8: List the Totals of Each Part of this Form			
55.				\$0.00
56.		\$11,538.00		Ψ0.00
57.		\$1,670.00		
58.	Part 4: Total financial assets, line 36	\$15.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$13,223.00	Copy personal property total	\$13,223.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$13,223.00

Official Form 106A/B Schedule A/B: Property page 5

Fill in this infor	mation to identify your	case:		
Debtor 1	Maria Teresa Aya	ıla		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is
				 amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$5,644.00		\$2,285.00	735 ILCS 5/12-1001(c)
		100% of fair market value, up to any applicable statutory limit	
\$525.00		\$525.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$315.00		\$315.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$200.00		\$200.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$115.00		\$115.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
	\$5,644.00 \$5,644.00 \$5,644.00 \$200.00	\$5,644.00	\$5,644.00 \$6,646 \$6,

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Debtor 1 Maria Teresa Ayala

cription of the property and line on e A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim	Specific laws that allow exemption
Clothing & Apparel		Che		
Slothing & Apparel		00	ck only one box for each exemption.	
n Schedule A/B: 11.1	\$415.00		\$415.00	735 ILCS 5/12-1001(a)
in Scriedule A/B. TTT			100% of fair market value, up to any applicable statutory limit	
Costume Jewelry	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
ii Scriedule A/B. 12.1			100% of fair market value, up to any applicable statutory limit	
ng: BMO Harris n Schedule A/B: 17.1	\$15.00		\$15.00	735 ILCS 5/12-1001(b)
ii Scriedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
rs Comp Case #17 WC 5807 Ayala vs Elgin Industries, Inc.	Unknown		\$0.00	820 ILCS 305/21
n Schedule A/B: 33.1			100% of fair market value, up to any applicable statutory limit	
to adjustment on 4/01/19 and every	3 years after that for ca	ises fi	,	,
n t	Schedule A/B: 33.1 Claiming a homestead exemption o adjustment on 4/01/19 and every Did you acquire the property cover	Schedule A/B: 33.1 Claiming a homestead exemption of more than \$160,37 to adjustment on 4/01/19 and every 3 years after that for call Did you acquire the property covered by the exemption with the schedule A/B: 33.1	Schedule A/B: 33.1 Claiming a homestead exemption of more than \$160,375? to adjustment on 4/01/19 and every 3 years after that for cases fill Did you acquire the property covered by the exemption within 1 No	Schedule A/B: 33.1 100% of fair market value, up to any applicable statutory limit claiming a homestead exemption of more than \$160,375? to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment plus you acquire the property covered by the exemption within 1,215 days before you filed this case

		Document	Page 17	⁷ of 55		
Fill in t	his information to identify yo	our case:				
Debtor	1 Maria Teresa A	Avala				
	First Name	Middle Name	Last Name			
Debtor		ACT III A				
(Spouse if	f, filing) First Name	Middle Name	Last Name			
United :	States Bankruptcy Court for th	e: NORTHERN DISTRICT OF ILL	INOIS			
Coco n	umbor					
Case no (if known)					☐ Check	if this is an
					_	led filing
						-
Officia (al Form 106D					
Sche	edule D: Creditor	s Who Have Claims	Secure	d by Propert	У	12/15
is needed number (1. Do any	d, copy the Additional Page, fill i (if known). y creditors have claims secured	e. If two married people are filing togeth it out, number the entries, and attach it by your property? t this form to the court with your other	to this form. O	n the top of any addition	nal pages, write your na	
	Yes. Fill in all of the information	n below.				
Part 1:	_					
			-04	Column A	Column B	Column C
for each	claim. If more than one creditor h	is more than one secured claim, list the cre las a particular claim, list the other creditors etical order according to the creditor's nam	s in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
211	issan Motor			¢2 250 00	\$5,644.00	\$0.00
A	cceptance editor's Name	Describe the property that secures t		\$3,359.00	\$3,044.00	φυ.υυ
CI	editor s ivame	2014 Nissan Sentra 55,000 n Fair Condition	niies			
P	O BOX 9001132	As of the date you file, the claim is:	Check all that			
L	ouisville, KY 40290	apply. Contingent				
Nu	umber, Street, City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who ov	ves the debt? Check one.	Nature of lien. Check all that apply.				
	or 1 only	An agreement you made (such as recar loan)	mortgage or sec	cured		
_	or 2 only					
_	or 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, med	chanic's lien)			
_	ast one of the debtors and another	_ ~	Auto Loan			
	ck if this claim relates to a number to a	Other (including a right to offset)	Auto Loan			
	bt was incurred 02/2014	Last 4 digits of account numl	ber XXXX			
				***	A.	40.400
	tate Farm Bank editor's Name	Describe the property that secures t		\$12,350.00	\$5,894.00	\$6,456.00
Cir	editor's Name	2013 Nissan Altima 72,300 n Fair Condition	niles			
P	O BOX 2313	As of the date you file, the claim is:	Check all that			
	loomington, IL 61702	apply. Contingent				
Nu	umber, Street, City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who ov	ves the debt? Check one.	Nature of lien. Check all that apply.				
	or 1 only or 2 only	An agreement you made (such as a car loan)	mortgage or sec	cured		
☐ Debt	or 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, med	chanic's lien)			
At lea	ast one of the debtors and another	Judgment lien from a lawsuit				
	ck if this claim relates to a nmunity debt	■ Other (including a right to offset)	Auto Loan			
Date del	bt was incurred 10/2014	Last 4 digits of account numl	ber XXXX			

Official Form 106D

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Dep	ntor i Maria Leres	а Ауаіа		Case number (if know)		
	First Name	Middle Name	Last Name	_		
-						
					_	
Ad	ld the dollar value of y	our entries in Column A on t	his page. Write that number here:	\$15,709.00)	
If t	his is the last page of	your form, add the dollar va	lue totals from all pages.	\$15,709.0	<u>, </u>	
Wr	rite that number here:			\$15,709.00	<u>'</u>	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		Document	Page 1	9 of 55	
Fill in this	information to identify your	case:			
Debtor 1	Maria Teresa Aya	a			
Dobtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Star	tes Bankruptcy Court for the:	NORTHERN DISTRICT OF I	LLINOIS		
Case numb	per				Charle if this is an
(II KIIOWII)					Check if this is an amended filing
					amended ming
Official	Form 106E/F				
	le E/F: Creditors W	ho Have Unsecured	d Claims		12/15
Schedule G: Schedule D: eft. Attach to name and ca	Executory Contracts and Unexp Creditors Who Have Claims Secondary the Continuation Page to this pages ase number (if known).	ired Leases (Official Form 106G). ured by Property. If more space is e. If you have no information to r	Do not include s needed, copy	any creditors with partially secu he Part you need, fill it out, num	erty (Official Form 106A/B) and on ired claims that are listed in iber the entries in the boxes on the of any additional pages, write your
	List All of Your PRIORITY Un				
-	creditors have priority unsecure	d claims against you?			
	Go to Part 2.				
☐ Yes.					
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims			
3. Do any	creditors have nonpriority unsec	ured claims against you?			
□ No.	You have nothing to report in this pa	art. Submit this form to the court wit	h your other sche	edules.	
Yes.					
unsecur	of your nonpriority unsecured classed claim, list the creditor separately a creditor holds a particular claim, li	for each claim. For each claim liste	ed, identify what t	ype of claim it is. Do not list claims	already included in Part 1. If more
					Total claim
4.1 AI	liance Pathology Consulta	ant Last 4 digits of ac	count number	XXXX	\$374.00
	npriority Creditor's Name			70001	
	OAC	When was the de	bt incurred?	07/217	
	D BOX 371100 araboo, WI 53913				
	mber Street City State Zlp Code	As of the date you	u file, the claim i	s: Check all that apply	
Wh	no incurred the debt? Check one.	•		11.7	
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and and	_ '	RITY unsecure	l claim:	
	Check if this claim is for a comm	По			
del			sing out of a sepa	ration agreement or divorce that ye	ou did not
ls t	he claim subject to offset?	report as priority cl	aims		
	No	☐ Debts to pension	on or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify	Medical		
		• •			

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Debtor 1 Maria Teresa Avala 4.2 \$580.00 **Bank of America** Last 4 digits of account number XXXX Nonpriority Creditor's Name PO BOX 982235 When was the debt incurred? 02/2016 El Paso, TX 79998 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Cards ☐ Yes 4.3 **Capital One** Last 4 digits of account number XXXX \$5,281.00 Nonpriority Creditor's Name PO BOX 30281 When was the debt incurred? 06/2013 Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Cards** Other. Specify **Center for Sports Orthopedics** 4.4 Last 4 digits of account number 3330 Unknown Nonpriority Creditor's Name 1585 Barrington Rd. Suite 101 When was the debt incurred? 2015 - 2017 Hoffman Estates, IL 60169 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify

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Debtor 1 Maria Teresa Ayala 4.5 \$1,147.00 Citicards Last 4 digits of account number XXXX Nonpriority Creditor's Name PO BOX 6241 When was the debt incurred? 06/2015 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Cards ☐ Yes 4.6 **Comenity Bank** Last 4 digits of account number XXXX \$2,270.00 Nonpriority Creditor's Name c/o Portfolio Recovery When was the debt incurred? 10/2016 120 Corporate Blvd., Suite 100 Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Cards** Other. Specify 4.7 **Commonwealth Edison** \$100.00 Last 4 digits of account number XXXX Nonpriority Creditor's Name c/o Credit Protection Assoc. LP When was the debt incurred? 07/2017 13355 Noel Rd, Ste 2100 Dallas, TX 75240 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Utilities ☐ Yes

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Case number (if know)

Debtor 1 Maria Teresa Ayala 4.8 \$136.00 **Compass Healthcare** Last 4 digits of account number XXXX Nonpriority Creditor's Name c/o Medical Business Bureau When was the debt incurred? 08/2017 **PO BOX 1219** Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other, Specify **Discover** 4.9 Last 4 digits of account number **XXXX** \$2,015.00 Nonpriority Creditor's Name PO BOX 15316 When was the debt incurred? 06/2013 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Cards ☐ Yes 4.1 **XXXX** Kohls \$534.00 Last 4 digits of account number 0 Nonpriority Creditor's Name **PO BOX 3115** When was the debt incurred? 11/2015 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt lacksquare Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Cards

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Case number (if know)

Debtor 1 Maria Teresa Ayala 4.1 Macys **XXXX** \$1,351.00 Last 4 digits of account number Nonpriority Creditor's Name **PO BOX 8218** When was the debt incurred? 10/2014 Mason, OH 45040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Cards ☐ Yes 4.1 **Marcon Medical Partners XXXX** \$830.00 Last 4 digits of account number Nonpriority Creditor's Name c/o Certified Services Inc. When was the debt incurred? 09/2015 1300 N. Skokie Hwy, Suite 103A Gurnee, IL 60031 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Medical 4.1 Medical Business Bureau LLC XXXX \$1,225.50 3 Last 4 digits of account number Nonpriority Creditor's Name 1460 Renaissance Dr. Suite 400 When was the debt incurred? 2016 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes

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Debtor 1 Maria Teresa Ayala Case number (if know) 4.1 **Northwest Surgical** \$0.00 Last 4 digits of account number 4 Nonpriority Creditor's Name When was the debt incurred? Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify **Northwest Surgical Specialists** 4187 \$4.565.00 Last 4 digits of account number Nonpriority Creditor's Name 3100 W. Higgins Rd, Suite 150 When was the debt incurred? 2016 Schaumburg, IL 60195 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical ☐ Yes 4.1 **Northwestern Medicine** 7518 \$92.40 Last 4 digits of account number 6 Nonpriority Creditor's Name 28155 Network Place When was the debt incurred? 11/2016 Chicago, IL 60673 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Medical

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Case number (if know) Debtor 1 Maria Teresa Ayala 4.1 Parkside Imaging, LTD 4595 Unknown Last 4 digits of account number Nonpriority Creditor's Name 1550 Todd Farm Dr. When was the debt incurred? 2015 Elgin, IL 60123 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes **Physicians Immediate Care North** 4.1 1281 Unknown 8 Chi Last 4 digits of account number Nonpriority Creditor's Name PO BOX 8799 2015 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Π Yes Other. Specify Medical Radiological Consultants of 4.1 **XXXX** \$260.00 9 Woodsto Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 01/2016 c/o Creditors Discount & Audit **PO BOX 213** Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Medical

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Case number (if know)

4.2 0	Synchron	y Bank	Last 4 digits of account number	XXX	X			\$1,256.00
	Nonpriority Creditor's Name c/o Midland Funding LLC 2365 Northside Dr.		When was the debt incurred?	09/2	016	_		
	Number Stree	o, CA 92108 et City State Zlp Code	As of the date you file, the claim	is: Chec	k all that a	oply		
	_	d the debt? Check one.						
	Debtor 1	•	☐ Contingent					
	Debtor 2	•	☐ Unliquidated					
		and Debtor 2 only	Disputed					
		ne of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if the debt	this claim is for a community	☐ Student loans			P d	P. L	
		subject to offset?	Obligations arising out of a separeport as priority claims	aration a	greement o	or divorce that you	did not	
	■ No	•	☐ Debts to pension or profit-sharin	ıg plans,	and other	similar debts		
	☐ Yes		■ Other Specify Credit Card	ls				
4.2 1	Synchron	y Bank reditor's Name	Last 4 digits of account number	XXX	X	_		\$843.00
	c/o Midlar 2365 Nort	nd Funding LLC	When was the debt incurred?	10/2	016			
	Number Stree	et City State Zlp Code d the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 o	only	☐ Contingent					
	Debtor 2 o	only	☐ Unliquidated					
	Debtor 1	and Debtor 2 only	☐ Disputed					
	☐ At least or	ne of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans —					
		this claim is for a community						
	debt Is the claim	subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration a	greement o	or divorce that you	did not	
	■ No		Debts to pension or profit-sharing	ıg plans,	and other	similar debts		
	☐ Yes		Other. Specify Credit Card	ł				
Part 3:	List Othe	ers to Be Notified About a Deb	That You Already Listed					
is tryii have i notifie	ng to collect to more than one ed for any deb	from you for a debt you owe to son e creditor for any of the debts that ots in Parts 1 or 2, do not fill out or		Parts 1	or 2, ther	list the collection	n agency her	e. Similarly, if you ´
Part 4:		Amounts for Each Type of Uns of certain types of unsecured clain	secured Claim s. This information is for statistical re	eporting	purpose	s only. 28 U.S.C. §	159. Add the	amounts for each
	of unsecured of							
	6	a. Domestic support obligations		6a.	\$	Total Claim	0.00	
	Total aims	a. Lomestic cappetit canganions		04.	Ψ		0.00	
from P		b. Taxes and certain other debts	<u> </u>	6b.	\$		0.00	
			ijury while you were intoxicated cured claims. Write that amount here.	6c. 6d.	\$ \$		0.00	
	0.	a. Offici. Add all other phonty unse	cured claims. Write that amount here.	ou.			0.00	1
	66	e. Total Priority. Add lines 6a throu	ıgh 6d.	6e.	\$		0.00	
						Total Claim		
	61 Fotal aims	f. Student loans		6f.	\$		0.00	

Official Form 106 E/F

from Part 2

6g. Obligations arising out of a separation agreement or divorce that

0.00

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Debtor 1 Maria Teresa Ayala

6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 22,859.90
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 22,859.90

Official Form 106 E/F

Fill in this infor	mation to identify your	case:		
Debtor 1	Maria Teresa Aya	ıla		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	

		Documer	nt Page 29 of .	<u>55 </u>
Fill in this info	rmation to identify your	case:		
Debtor 1	Maria Teresa Aya	la		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS	
Case number (if known)				☐ Check if this is an amended filing
	orm 106H <mark>e H: Your Cod</mark>	ebtors		12/15
people are filin fill it out, and n your name and	g together, both are equiumber the entries in the case number (if known)	ally responsible for supply	ying correct informatior the Additional Page to t	complete and accurate as possible. If two married in. If more space is needed, copy the Additional Page, this page. On the top of any Additional Pages, write a codebtor.
		lived in a community pro Nevada, New Mexico, Pue		(Community property states and territories include pton, and Wisconsin.)
■ No. Go		ise, or legal equivalent live	with you at the time?	
in line 2 a	gain as a codebtor only it D), Schedule E/F (Official	f that person is a guaranto	or or cosigner. Make sui	your spouse is filing with you. List the person shown re you have listed the creditor on Schedule D (Official S). Use Schedule D, Schedule E/F, or Schedule G to fill
	mn 1: Your codebtor , Number, Street, City, State and ZII	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
703: Car	Pantoja 3 Lowell Dr. #3c pentersville, IL 60110 ce of Debtor, who mak	es the monthly payme	nt	■ Schedule D, line □ Schedule E/F, line □ Schedule G State Farm Bank

Schedule H: Your Codebtors

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Fill	in this information to identify your	case.				I				
	otor 1 Maria Tere									
	otor 2 ouse, if filing)				_					
Uni	ted States Bankruptcy Court for th	e: NORTHERN DISTRIC	CT OF ILLINOIS							
O'Be a	fficial Form 1061 chedule I: Your Incase complete and accurate as poplying correct information. If your	ssible. If two married peo u are married and not fili	ng jointly, and your	spouse is	s liv	Ar A	M / DD/ Y	d filing ent showin as of the for YYY th are equude inforr	nation about	12/15 ible for your
atta	use. If you are separated and you che a separate sheet to this form t 1: Describe Employmen	. On the top of any additi								
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-fi	iling spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status Occupation	☐ Employed ■ Not employed				☐ Emplo	-		
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
	Circ Patella About M	How long employed to	here?				_			
Esti	mate monthly income as of the use unless you are separated.		you have nothing to r	eport for a	any I	line, write	\$0 in the	space. In	clude your nor	n-filing
-	u or your non-filing spouse have r e space, attach a separate sheet t		ombine the information	on for all e	mplo	oyers for t	hat perso	n on the li	nes below. If	ou need
						For Deb	tor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sal deductions). If not paid monthly			2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly ove	rtime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$		0.00	\$	N/A	

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 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 0.00 13. Do you expect an increase or decrease within the year after you file this form? No. 	Debto	r 1	Maria Teresa Ayala	-	Cas	e number (if kn	own)				
Copy line 4 here 4. \$ 0.00 \$ NA List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retrement plans 5c. Voluntary contributions for retrement fund loans 5c. Voluntary contributions for retrement fund loans 5c. Voluntary contributions for retrement fund loans 5c. Voluntary contributions for retirement fund loans 5c. Voluntary contributions fund fund loans 5c. Voluntary contributions fund fund fund fund fund fund fund fund					Fo	or Debtor 1		For	r Debtor	2 or	
Sea. Tax, Medicare, and Social Security deductions 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Noturitary contributions for retirement fund loans 5c. Noturitary contributions 5c. Noturitary for eductions. Specify: 6c. Noturitary for eductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6c. Noturitary for eductions. Noturitary received: 8c. List all other income regularly received: 8c. Not income from rental property and from operating a business, profession, of farm property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. Social Security 8d. Other government assistance that you requirely settlement end to the form of the supplemental Nutrition Assistance Programy or housing subsidies. 8e. Social Security 8g. Pension or retirement income 8g. \$ 0.000 \$ N/A 8d. Other government assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8e. Social Security 8g. Pension or retirement income 8g. \$ 0.000 \$ N/A 8d. Other government assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefit					-	Deptor 1					
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions of the security of the secu		Сор	y line 4 here	4.	\$	0	.00			-	
55. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Solon \$ N/A 5c. Required repayments of retirement fund loans 5c. \$ 0.00 \$ N/A 5c. Insurance 5c. \$ 0.00 \$ N/A 5c. I	5.	List	all payroll deductions:								
55. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Solon \$ N/A 5c. Required repayments of retirement fund loans 5c. \$ 0.00 \$ N/A 5c. Insurance 5c. \$ 0.00 \$ N/A 5c. I		5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0	.00	\$		N/A	
50. Voluntary contributions for retirement plans 51. Required repayments of retirement fund loans 52. Required repayments of retirement fund loans 53. Required repayments of retirement fund loans 54. Required repayments of retirement fund loans 55. Domestic support obligations 56. Insurance 57. Solution dues 58. Solution dues 58. Solution dues 59. Union dues 59. Union dues 59. Union dues 59. Union dues 59. N/A 59. Other deductions. Add lines 5a+5b+5c+5c+5d+5e+5f+5g+5h. 6. Solution dues 59. N/A 59. Add the payroll deductions. Add lines 5a+5b+5c+5c+5d+5e+5f+5g+5h. 6. Solution dues 59. N/A 59. Add the payroll deductions. Add lines 5a+5b+5c+5c+5d+5e+5f+5g+5h. 6. Solution dues 59. N/A 59. Add the payroll deductions. Add lines 5a+5b+5c+5c+5d+5e+5f+5g+5h. 6. Solution dues 59. N/A 59. Add the payroll deductions. Add lines 5a+5b+5c+5c+5d+5e+5f+5g+5h. 6. Solution dues 59. N/A 59. Add the payroll deductions. Add lines 5a+5b+5c+5c+5d+5e+5f+5g+5h. 6. Solution dues 59. N/A 59. Add the payroll deductions. Add lines 5a+5b+5c+5c+5d+5e+5f+5g+5h. 59. 0.00 SN/A 59. N/A 59. N/A 59. N/A 59. Add all other income. 50. N/A 5		5b.	•					_			
56. Required repayments of retirement fund loans 56. Insurance 56. \$ 0.000 \$ N/A 56. Domestic support obligations 56. Is \$ 0.000 \$ N/A 59. Union dues 59. \$ 0.000 \$ N/A 50. \$ 0.000 \$ N/A 50		5c.	Voluntary contributions for retirement plans	5c.	\$			\$			
55. Domestic support obligations 50. Union dues 50. S. S. D.000 \$ N/A 50. Other deductions. Specify: 50. Union dues 50. S. S. D.000 \$ N/A 50. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.000 \$ N/A 60. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.000 \$ N/A 61. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.000 \$ N/A 62. List all other income regularly received: 63. Net income from rental property and from operating a business, profession, or farm. 64. An a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 65. Family support payments that you, a non-filling spouse, or a dependent regularly receive linclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 68. Unemployment compensation 68. Social Security 69. Other government assistance that you regularly receive linclude cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 69. Specify: 60. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 61. Calculate monthly income. Specify: 61. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried pather, members of your household, your dependents, your roommates, and other friends or relatives. 62. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried pather, members of your household, your dependents, your roommates, and other friends or relatives. 63. Do you expect an increase or decrease within the year after you file this form? 64. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 65. N/A 66. Social Security 67. Add the amount in		5d.	Required repayments of retirement fund loans	5d.	\$	0	.00	\$			
5g. Union dues 5h. Other deductions. Specify: 5h. \$ 0.00 \$ N/A 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ N/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ N/A 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8g. Pension or retirement income 8h. Other monthly income. Add line 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 8h. \$ 0.00		5e.	Insurance	5e.	\$	0	.00	\$		N/A	
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■ No.	12	Do ·	you expect an increase or decrease within the year often you file this form	2							
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		_	No. Yes Explain:								

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Fill in t	nis information	to identify yo	ur case:					
Debtor		aria Teresa				Chaol	k if this is:	
		aria Teresa	Ayaia				An amended filing	
Debtor 2 (Spouse	2 e, if filing)						A supplement shov 13 expenses as of	ving postpetition chapter the following date:
United S	States Bankrupto	v Court for the:	NORTH	HERN DISTRICT OF ILLIN	OIS	 	MM / DD / YYYY	
	·	,					, ,	
Case nu (If know								
	cial Form							
	edule J							12/1
inform		space is nee	eded, atta	. If two married people ar ich another sheet to this n.				
Part 1:		Your Housel	hold					
	this a joint ca							
	No. Go to line Yes. Does D e		n a separ	ate household?				
_	□ No	COLOT 2 IIVC II	ii a sopai	ato nousciloia.				
		Debtor 2 mus	t file Offic	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debte	or 2.	
2. D	o you have de	pendents?	□ No					
	o not list Debto ebtor 2.	or 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	o not state the							□ No
de	ependents nam	ies.			Nephew			■ Yes □ No
					Niece		23	■ Yes
								□ No
								☐ Yes ☐ No
								☐ No ☐ Yes
	o your expens			No			-	
	openses of pe ourself and yo			Yes				
Part 2:		Your Ongoin		ly Fynansas				
Estima	te your exper	ses as of yo	ur bankr	uptcy filing date unless y y is filed. If this is a supp				
Includ	e expenses pa	aid for with n	on-cash	government assistance i	f you know			
the val				cluded it on Schedule I: \			Your expe	enses
	he rental or he ayments and a			ses for your residence. I or lot.	nclude first mortgage	e 4. \$		0.00
If	not included	in line 4:						
48	a. Real estat	e taxes				4a. \$		0.00
41		homeowner's				4b. \$		0.00
40 40				upkeep expenses dominium dues		4c. \$ 4d. \$		0.00
				oominium dues our residence, such as ho	me equity loans	4a. \$ 5. \$	-	0.00

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Debtor 1 _	Maria Teresa Ayala	Case num	ber (if known)	
6. Utilitie	es:			
	Electricity, heat, natural gas	6a.	\$	220.00
	Water, sewer, garbage collection	6b.	\$	25.00
	Telephone, cell phone, Internet, satellite, and cable services	6c.	·	120.00
	Other. Specify:	6d.		0.00
	and housekeeping supplies	7.	· -	725.00
	and nousekeeping supplies are and children's education costs	7. 8.	\$	
		9.	\$	0.00
	ng, laundry, and dry cleaning		· -	35.00
	nal care products and services	10.	\$	50.00
	al and dental expenses	11.	\$	150.00
	portation. Include gas, maintenance, bus or train fare. include car payments.	12.	\$	100.00
	ainment, clubs, recreation, newspapers, magazines, and books	13.		0.00
	able contributions and religious donations	14.	· -	0.00
i. Insura	•	14.	Ψ	0.00
	include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	28.00
	Health insurance	15b.	·	360.00
	Vehicle insurance	15c.	·	248.00
	Other insurance. Specify:	15d.	·	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.	130.	Ψ	0.00
Specify		16.	\$	0.00
	ment or lease payments:		Ψ	0.00
	Car payments for Vehicle 1	17a.	\$	350.00
	Car payments for Vehicle 2	17b.	*	362.00
	Other. Specify:	17c.	·	0.00
	Other. Specify:	17c. 17d.	· ·	0.00
	ouner. Specify. payments of alimony, maintenance, and support that you did not report		Ψ	0.00
	ted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106)		\$	0.00
	payments you make to support others who do not live with you.	.,.	\$	0.00
Specify		19.	·	0.00
	real property expenses not included in lines 4 or 5 of this form or on So		our Income.	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	Maintenance, repair, and upkeep expenses	20d.	·	0.00
	Homeowner's association or condominium dues	20a. 20e.		0.00
		206.	·	
. Other:	Specify:	21.	+\$	0.00
. Calcul	ate your monthly expenses			
	dd lines 4 through 21.		\$	2.773.00
22b. C	opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	2	\$,
	dd line 22a and 22b. The result is your monthly expenses.		\$	2,773.00
220. A	ad into 22a and 22b. The result is your monthly expenses.			2,113.00
3. Calcul	ate your monthly net income.			
23a. (Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	0.00
	Copy your monthly expenses from line 22c above.	23b.	-\$	2,773.00
				_,
23c.	Subtract your monthly expenses from your monthly income.			0.770.00
	The result is your monthly net income.	23c.	\$	-2,773.00
	u expect an increase or decrease in your expenses within the year after			
	imple, do you expect to finish paying for your car loan within the year or do you expect y	our mortgage	payment to increase	or decrease because of
	ation to the terms of your mortgage?			
No.				
☐ Yes	Explain here:			

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Fill in this info	rmation to identify your	case:			
Debtor 1	Maria Teresa Aya	la			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Sankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official For	m 106Dec				
Declara	tion About a	n Individual	Debtor's Scl	hedules	12/15
years, or both.	ey or property by fraud ii 18 U.S.C. §§ 152, 1341, 1 gn Below	n connection with a bank 519, and 3571.	rruptcy case can result in	fines up to \$250,000	0, or imprisonment for up to 20
		one who is NOT an attor	ney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes.	Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules filed	l with this declaration	n and
X /s/ Ma	ria Teresa Ayala		X		
Maria	Teresa Ayala ure of Debtor 1		Signature of D	Debtor 2	

Date _____

Date **June 1, 2018**

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Fill in	this inform	ation to identify you	r case:			
Debtor	· 1	Maria Teresa Ay	ala			
		First Name	Middle Name	Last Name		
Debtor (Spouse		First Name	Middle Name	Last Name		
United	States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Offica	Otates Dan	Kruptcy Court for the.	HORTHERN BIOTHIOT	OI ILLIIVOIO		
Case n	number					Check if this is an mended filing
Offic	ial For	m 107				
			Affairs for Indivi	duals Filing for E	ankruptcy	4/10
informa	ation. If mo	ore space is needed,). Answer every ques	attach a separate sheet to	this form. On the top of an	equally responsible for sup y additional pages, write you	
1. WI		current marital statu				
□	Married Not marri	ied				
2. Du	uring the las	st 3 years, have you	lived anywhere other than	where you live now?		
■□	No Yes. List	all of the places you I	ived in the last 3 years. Do n	ot include where you live now	<i>v</i> .	
D	ebtor 1 Prid	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	Idress:	Dates Debtor 2 lived there
					nity property state or territor ico, Texas, Washington and V	
	No Yes. Mak	e sure you fill out <i>Sch</i>	nedule H: Your Codebtors (C	official Form 106H).		
Part 2	Explain	the Sources of You	r Income			
Fill	I in the total	amount of income yo	u received from all jobs and	ng a business during this y all businesses, including part re together, list it only once u		ndar years?
□		n the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	st calendar ary 1 to Dec	year: ember 31, 2017)	■ Wages, commissions, bonuses, tips	\$7,149.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Page 36 of 55 Case number (if known) Debtor 1 Maria Teresa Ayala

				Debtor 1		Debt	or 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)		ces of inco k all that ap		Gross income (before deductions and exclusions)
For the calendar year before that: (January 1 to December 31, 2016)				■ Wages, commissions, bonuses, tips	\$10,876.0		ages, comn ses, tips	nissions,	
				☐ Operating a business			perating a b	usiness	
	r the calen nuary 1 to	dar year: December 3	31, 2015)	■ Wages, commissions, bonuses, tips	\$20,080.0		ages, comn	nissions,	
				☐ Operating a business			perating a b	usiness	
	winnings. List each No	If you are filir	ng a joint cas	pensions; rental income; inter e and you have income that y me from each source separat	ou received together, list	it only onc	e under Deb	otor 1.	i gambiing and lottery
				Debtor 1		Debt	or 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sour	ces of inco	me	Gross income (before deductions and exclusions)
Pai	rt 3: Lis	t Certain Pay	ments You	Made Before You Filed for	Bankruptcy				
6.	□ No.	Neither De individual p During the S No. Yes * Subject to	btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include o adjustment r Debtor 2 o 90 days befo Go to line 7 List below e include payo	ach creditor to whom you pai editor. Do not include paymen payments to an attorney for the on 4/01/19 and every 3 years or both have primarily consulter re you filed for bankruptcy, ditall ach creditor to whom you pai ments for domestic support of	Imer debts. Consumer ded purpose." If you pay any creditor a tend of \$6,425* or mosts for domestic support on his bankruptcy case. It is after that for cases filed imer debts. In the debt of \$600 or more desired purposes.	ore in one obligations, on or after total of \$600 and the total	r more payn such as chil the date of 0 or more?	e? nents and th d support ar adjustment. ou paid that	e total amount you nd alimony. Also, do creditor. Do not
			attorney for	this bankruptcy case.					
	Creditor	's Name and	Address	Dates of payme	nt Total amount paid		unt you still owe	Was this p	ayment for

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Page 37 of 55 Debtor 1 ase number (*if known*) Maria Teresa Ayala Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο Yes. List all payments to an insider. **Insider's Name and Address** Reason for this payment Dates of payment Total amount Amount you still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Capital One Bank USA NA vs Maria Civil **Kane County Courthouse** Pending T. Ayala 100 S. Third Street □ On appeal 18 SC 0264 Geneva, IL 60134 □ Concluded Maria Ayala vs Elgin Industries Inc. Workers Kane County Courthouse Pending 17 WC 5807 Compensation 100 S. Third Street □ On appeal Geneva, IL 60134 □ Concluded 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

Yes Case 18-15853 Doc 1 Filed 06/01/18 Entered 06/01/18 11:37:11 Desc Main

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Case number (if known) Document Debtor 1 Maria Teresa Ayala

Part	5: List Certain Gifts and Contributions	i								
ļ	No	ptcy,	did you give any gifts with a total value of more t	han \$600 per person	?					
	Yes. Fill in the details for each gift.									
	Gifts with a total value of more than \$600 per person)	Describe the gifts	Dates you gave the gifts	Value					
	Person to Whom You Gave the Gift and Address:									
		ptcy,	did you give any gifts or contributions with a total	al value of more than	\$600 to any charity?					
	■ No □ Yes. Fill in the details for each gift or contribution.									
ľ	Gifts or contributions to charities that to		Describe what you contributed	Dates you	Value					
	more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		bescribe what you contributed	contributed	Value					
Part	6: List Certain Losses									
	or gambling? ■ No □ Yes. Fill in the details.	•	r since you filed for bankruptcy, did you lose any		it, ine, other disaster,					
	how the loss occurred	Includ	ribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost					
Part	7: List Certain Payments or Transfers									
(consulted about seeking bankruptcy or pi	repar	did you or anyone else acting on your behalf pay or ing a bankruptcy petition? ers, or credit counseling agencies for services require		erty to anyone you					
ı	□ No									
I	Yes. Fill in the details.									
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment					
	James Young Law 85 Market Street Elgin, IL 60123		\$900 - Attorney Fee \$335 - Filing Fee	02/22/18	\$1,235.00					
!	promised to help you deal with your credi Do not include any payment or transfer that y	itors		or transfer any prope	erty to anyone who					
	■ No Yes, Fill in the details.									
	Yes. Fill in the details. Person Who Was Paid		Description and value of any property	Date navment	Amount of					
	Address		Description and value of any property transferred	Date payment or transfer was made	payment					

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Debtor 1 Maria Teresa Ayala

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.								
	Person Who Received Transfer Address Person's relationship to you	Description and v		Describe any property or payments received or deb paid in exchange	Date transfer was made				
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.								
	Name of trust	Description and v	alue of the prope	erty transferred	Date Transfer was made				
Par	t 8: List of Certain Financial Accounts, Ins	truments, Safe Deposi	t Boxes, and Stor	age Units					
20.	sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc No	r other financial accou	nts; certificates o	•	•				
	☐ Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accoun instrument	t or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer				
21.	cash, or other valuables?	ear before you filed for	bankruptcy, any		epository for securities,				
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the contents	Do you still have it?				
22.	Have you stored property in a storage unit o No Yes. Fill in the details.	r place other than your	home within 1 ye	ear before you filed for bank	ruptcy?				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or I to it? Address (Number, S State and ZIP Code)		Describe the contents	Do you still have it?				
Par	t 9: Identify Property You Hold or Control f	for Someone Else							
23.	Do you hold or control any property that son for someone.	neone else owns? Incl	ude any property	you borrowed from, are stor	ing for, or hold in trust				
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the property	Value				
Par	t 10: Give Details About Environmental Info	rmation							
or	the purpose of Part 10, the following definition	ons apply:							

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 5

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Debtor 1 Maria Teresa Ayala

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

		or similar term.						
rt a	Il notices, releases, and proceedings that	it you know about, regardless of when	the	ey occurred.				
Has	any governmental unit notified you that	you may be liable or potentially liable	und	der or in violation of an environme	ntal law?			
_	No							
	Yes. Fill in the details.							
		Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice			
Hav	e you notified any governmental unit of	any release of hazardous material?						
	No Yes. Fill in the details.							
		Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice			
Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.								
■ No □ Yes. Fill in the details.								
-		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case			
11:	Give Details About Your Business or 0	Connections to Any Business						
Witl	nin 4 vears before vou filed for bankrupt	cv. did vou own a business or have an	v of	the following connections to any	business?			
			•	,				
	☐ An officer, director, or managing exe	ecutive of a corporation						
	☐ An owner of at least 5% of the voting	or equity securities of a corporation						
_								
			S.					
	siness Name	Describe the nature of the business		1 3				
		Name of accountant or bookkeeper		Dates business existed				
		cy, did you give a financial statement t	to ar	nyone about your business? Inclu	de all financial			
	No							
	Yes. Fill in the details below.							
Ad	dress	Date Issued						
	Has Nail Add Hav III Bud (Num With inst	Has any governmental unit notified you that No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you notified any governmental unit of a No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you been a party in any judicial or adm No Yes. Fill in the details. Case Title Case Number Give Details About Your Business or Company of the State St	Has any governmental unit notified you that you may be liable or potentially liable No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Ame of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Covernmental unit Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Court or agency Name Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Court or agency Name Address (Number, Street, City, State and ZIP Code) State and ZIP Code) No A sole proprietor or self-employed in a trade, profession, or other activity, A member of a limited liability company (LLC) or limited liability partnersh A partner in a partnership An officer, director, or managing executive of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Within 2 years before you filed for bankruptcy, did you give a financial statement institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued	Has any governmental unit notified you that you may be liable or potentially liable und No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Governmental unit Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Title Case Number Case Title Case Number Address (Number, Street, City, State and ZIP Code) No A sole proprietor or self-employed in a trade, profession, or other activity, eith A member of a limited liability company (LLC) or limited liability partnership (L A partner in a partnership An officer, director, or managing executive of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Now Tyes. Fill in the details below. No Yes. Fill in the details below. No Date Issued Date Issued	Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Court or agency Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name N			

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6 Case 18-15853 Doc 1 Filed 06/01/18 Entered 06/01/18 11:37:11 Desc Main Page 41 of 55 Case number (if known) Document

Debtor 1 Maria Teresa Ayala

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Maria Teresa Ayala

Signature of Debtor 2 Maria Teresa Ayala Signature of Debtor 1 Date June 1, 2018 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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			· ·	
Fill in this infor	mation to identify you	case:		
Debtor 1	Maria Teresa Ay	ala		
Dahtaro	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Coop number				
Case number (if known)				Check if this is an amended filing
If you are an ind	nt of Intention	apter 7, you must fi	viduals Filing Under Ch	apter 7 12/15
creditors have claims secured by your property, or				
You must file th	ever is earlier, unless t	within 30 days after	not expired. you file your bankruptcy petition or by the le time for cause. You must also send copie	
	eople are filing togethord date the form.	er in a joint case, bo	oth are equally responsible for supplying co	orrect information. Both debtors must
	and accurate as possi your name and case nu		s needed, attach a separate sheet to this fo	rm. On the top of any additional pages,
Part 1: List Y	our Creditors Who Ha	ve Secured Claims		
1. For any credi		Part 1 of Schedule D	Creditors Who Have Claims Secured by F	Property (Official Form 106D), fill in the
	reditor and the property	that is collateral	What do you intend to do with the prope secures a debt?	rty that Did you claim the property as exempt on Schedule C?
Creditor's	Nissan Motor Accep	tance	☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	-
Description of	f 2014 Nissan Sent	ra 55,000 miles	Retain the property and enter into a Reaffirmation Agreement.	Yes
property securing debt	Fair Condition		Retain the property and [explain]:	
Creditor's	State Farm Bank		☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it	

Part 2: List Your Unexpired Personal Property Leases

Fair Condition

2013 Nissan Altima 72,300 miles

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

Describe your unexpired personal property leases

Will the lease be assumed?

Yes

Description of

securing debt:

property

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Debtor 1 Maria Teresa Ayala	Case number (if known)
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention abou property that is subject to an unexpired lease.	t any property of my estate that secures a debt and any personal
X /s/ Maria Teresa Ayala X Maria Teresa Ayala	Signature of Debtor 2
Signature of Debtor 1 Date June 1, 2018 Da	te

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-15853 Doc 1 Filed 06/01/18 Entered 06/01/18 11:37:11 Desc Main Document Page 48 of 55

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Maria Teresa Ayala		Case No).
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR I	DEBTOR(S)
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(loompensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy	y, or agreed to be pa	id to me, for services rendered or to
	For legal services, I have agreed to accept		\$	900.00
	Prior to the filing of this statement I have received			900.00
	Balance Due		\$	0.00
2. Т	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. 7	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	I have not agreed to share the above-disclosed compe	ensation with any other person	n unless they are me	embers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensate copy of the agreement, together with a list of the name			
5.]	In return for the above-disclosed fee, I have agreed to ren	nder legal service for all aspec	cts of the bankruptc	y case, including:
t c	 Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of creditor [Other provisions as needed] Negotiations with secured creditors to re reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hour 	ment of affairs and plan which rs and confirmation hearing, and educe to market value; ex ins as needed; preparatio	th may be required; and any adjourned be cemption planning	earings thereof; g; preparation and filing of
5. I	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc any other adversary proceeding.			nces, relief from stay actions or
		CERTIFICATION		
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for	or payment to me fo	r representation of the debtor(s) in
Jı	ıne 1, 2018	/s/ James A. You	ung	
\overline{D}	ate	James A. Young		
		Signature of Attorr James A. Young		
		85 Market Street		
		Elgin, IL 60123		
		847-793-1031	ınalaw com	
		sarai@jamesyou Name of law firm	angiaw.com	
		Traine of taw firm		

ENGAGEMENT FOR LEGAL SERVICES – CHAPTER 7 BANKRUPTCY

This Engagement for Legal Services, hereafter referred to as "Agreement", is hereby entered into by and between the law firm of James A. Young, herein after referred to collectively as "Counsel", and Client in connection with Counsel's representation of Client in a Chapter 7 Bankruptcy. Pursuant to this Agreement, Counsel and Client agree to as follows:

- 1. Retainer for Legal Services. The minimum amount that will be charged for this engagement will be \$900.00 ("Retainer"). The retainer paid by Client is considered an advance payment retainer, which means that once paid, the retainer becomes property of Counsel and will not be deposited into a client trust account, but rather into Counsel's general account. Client agrees and understands that the Advance Payment Retainer is non-refundable once paid due to Counsel's inability to accept other engagements which might conflict with our representation of you. Client has the right to request that the retainer be held in a client trust account as a security retainer allowing Counsel to bill at Counsel's hourly rate of \$275.00 per hour against said retainer. However if such retainer is requested, Counsel must decline the engagement for practical reasons including the potential accessibility of the security retainer by Client's creditors and increased staff and bookkeeping time required to properly administer a security retainer. This retainer does not cover representation of Client in any Adversary Proceedings that may be filed against Client by any creditors or the Bankruptcy Trustee. A separate Retainer will be required.
- 2. Additional Costs and Expenses. In addition to the retainer described above, Client is responsible for the court filing fee in the amount of \$335.00. The retainer described above does not cover the court filing fee and additional costs and expenses relating to the representation of Client by Counsel. Client agrees that he or she is responsible for any and all additional costs and expenses, which may include expenses for postage, photocopies, other professional fees, expert witness fees, credit counseling fees, credit report fees, etc. In the event that Counsel advances any amount towards payments of any additional costs and expenses, Client agrees to reimburse Counsel for said costs and expenses within fifteen (15) days from the date notified by Counsel of said advancement of costs and expenses.
- 3. Payment of Retainer and Court Filing Fee. Client understands that the Chapter 7 Bankruptcy Case will not be filed with the U.S. Bankruptcy Court until such time that the Retainer and Court Filing Fee are paid in full.
- 4. Additional Fees. This retainer does not cover any legal fees for legal services beyond the preparation of the bankruptcy petition and schedules and attendance of the First Meeting of Creditors. In the event that Counsel is required to appear at any continued First Meeting of Creditors or is required to appear in court to defend against or present any motions on Client's behalf, Client understands that Counsel reserves the right to bill Client for the additional time expended at his hourly rate of \$275.00 per hour. Client agrees to pay Counsel for said additional time expended within fifteen (15) days from the date notified by Counsel of said additional time expended.
- 5. <u>Clients Obligations.</u> The Client's obligations are as follows:
 - a. To promptly pay all legal fees, charges and the court filing fee.
 - b. To provide Counsel with all requested documents, bills, statements, payment advices, bank records, tax returns, tax bills, appraisals, retirement and savings accounts, income information and to sign any and all necessary forms to allow Counsel to secure such documentation.
 - c. To provide accurately and honestly for all of the information necessary to prepare and file the Chapter 7 Bankruptcy case and other motions or proceedings arising during the course of the case.
 - d. To timely respond to all letters, emails and telephone calls from Counsel or any member of his staff.
 - e. To keep Counsel advised at all times of the Client's mailing and physical addresses, telephone numbers and email addresses.
 - f. To appear at the first meeting of creditors (341 Meeting) and at any other court hearings or meetings as may be required by the Court or any other party.
 - g. To keep all scheduled office appointments with Counsel and to notify Counsel in advance of any problems with the timing and scheduling of such appointments
 - h. To contact Counsel by telephone with the understanding that Counsel is only able to return calls between the hours of 9:00 a.m. and 5:00 p.m. If Counsel is available when the call is received, then the call will be taken at that time. However, if you have to leave a message for Counsel then you must provide a number that you can be reached at during the designated times. Counsel or Legal Assistant

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- will make every effort to return all such telephone calls within 24 hours, excluding weekends and holidays.
- i. To provide any information requested of the Client by the Chapter 7 Trustee, the Bankruptcy Administrator or any other party in the case, unless the Court rules that the Client is not required to provide such information.
- j. To respond as soon as possible to any requests made by the Counsel to get copies of income tax returns from the respective taxing agencies for a period of two (2) years prior to the filing of your bankruptcy case.
- k. To sign a tax authorization form to authorize Counsel to get copies of income tax returns from the respective taxing agencies for a period of two (2) years prior to the filing of your bankruptcy case.
- I. To provide current bank account information to include monthly statements as requested and online account balances as of the date of the signing of your bankruptcy petition packet.
- 6. Attorney Withdrawal from a Chapter7 case, Adversary Proceeding or Contested Matter. Pursuant to the Local Rules of the Bankruptcy Court, Counsel shall remain the responsible attorney of record for the Client in all matters in the case until the case is closed, dismissed or the discharge is entered or until the Attorney is relieved from such representation by order of the Court. The parties agree that just reasons for Counsel to withdraw from the representation of the Client, include but are not limited to the following:
 - a. The failure of the Client to provide complete, truthful and accurate information to Counsel.
 - b. The failure of the Client to comply with the Client's obligations as provided for in this Agreement and in the Local Rules.
 - c. The failure of the Client to comply with any of the obligations imposed on the Client by the Bankruptcy Code and Bankruptcy Rules.
 - d. The failure or refusal of the Client to comply with the Client's obligations to provide any supplemental information to the Court or to the Chapter 7 Trustee or to correct any incorrect or incomplete information previously provided to the Court or to the Trustee.
 - e. The failure of the Client to pay for all legal fees and costs.
 - f. If the Client are husband and wife, then any separation, serious domestic dispute or divorce of the parties.
 - g. Any irreconcilable conflict between Counsel and Client with respect to the case.
- 7. <u>Non-Dischargeability of Certain Debts.</u> I have been advised that some debts are **NOT** discharged by a Chapter 7 Bankruptcy. I understand that some of the debts that are not dischargeable are
 - 1. Certain Tax debts and other debts or fines owed to governmental units, including parking tickets.
 - 2. Debts incurred by fraudulent means, including but not limited to, recent cash advances or other recent usage.
 - 3. Accidents while driving under the influence of drugs and/or alcohol.
 - 4. Alimony and Child Support.
 - 5. Judgement liens and liens on property.
 - 6. Intentional torts.
 - 7. Credit card charges used to pay State or Federal Taxes.
 - 8. Student Loans owed to the government and non-governmental agencies, and
 - 9. Home Owners' or Condominium Association Dues.
- 8. <u>Scope of Services.</u> Client understands that Counsel has been hired to represent Client in his/her/their bankruptcy case only. Bankruptcy provides relief from debt, and as such Client understands that Counsel **HAS NOT** been hired to negotiate settlement agreements with Client's creditors or to repair Client's credit. Client agrees to be responsible for insuring the accuracy of his/her/their own credit report/history.
- 9. Representations. Every effort will be made to handle your case promptly and efficiently according to the highest legal and ethical standards. There have been no representations or guarantees made by Counsel regarding the outcome of the matter. Any discussion in this regard, past or present, are limited only to estimates based upon Counsel's experience and judgement, but in no event should be considered as a representation, promise or guarantee as to the result which might be obtainable.
- 10. Severability. If any clause, phrase, provision or portion of this Agreement or the application thereof to any person or circumstance shall be invalid or unenforceable under applicable law, such invalidity or unenforceability shall not

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affect, impair or render invalid or unenforceable the remainder of this Agreement nor any other clause, phrase, provision or portion hereof.

11. Law Governing and Jurisdiction. This Agreement shall be interpreted in accordance with the laws of the State of Illinois and the parties irrevocably consent to the exclusive jurisdiction and venue of the Circuit Court of Kane County, Illinois located in Geneva, Illinois in connection with any action or proceeding arising out of or relating to this Agreement.

Client has been informed and fully understands the following restrictions regarding receiving a discharge in another bankruptcy once Client receives a discharge in this bankruptcy:

- a. A Chapter 7 Client may not be granted a discharge if a discharge was received under Chapter 7 in a case filed within eight (8) years of the filing of a Chapter 7 petition. (Eight years between Chapter 7 discharges).
- b. A Chapter 13 Client may not be granted a discharge if he/she/they received a discharge in a previous Chapter 7, 11 or 12 filed within four (4) years of the filing of a Chapter 13. (Four years between Chapter 7 and then a Chapter 13 discharge.)

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Maria T. Ayula Client	3/26/18 Date
Client	Date
Counsel A Gran	Date

James A. Young Law, LLC. 85 Market Street Elgin, IL 60123 (847) 608-9526

United States Bankruptcy Court Northern District of Illinois

In re	Maria Teresa Ayala		Case No.	
		Debtor(s)	Chapter 7	
	VE	RIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	24
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	tors is true and correct to th	e best of my
Date:	June 1, 2018	/s/ Maria Teresa Ayala Maria Teresa Ayala Signature of Debtor		

Alliance Pathology Consultant c/o OAC PO BOX 371100 Baraboo, WI 53913

Bank of America PO BOX 982235 El Paso, TX 79998

Capital One PO BOX 30281 Salt Lake City, UT 84130

Center for Sports Orthopedics 1585 Barrington Rd. Suite 101 Hoffman Estates, IL 60169

Citicards PO BOX 6241 Sioux Falls, SD 57117

Comenity Bank c/o Portfolio Recovery 120 Corporate Blvd., Suite 100 Norfolk, VA 23502

Commonwealth Edison c/o Credit Protection Assoc. LP 13355 Noel Rd, Ste 2100 Dallas, TX 75240

Compass Healthcare c/o Medical Business Bureau PO BOX 1219 Park Ridge, IL 60068

Discover PO BOX 15316 Wilmington, DE 19850

Ixel Pantoja
7033 Lowell Dr. #3c
Carpentersville, IL 60110

Kohls PO BOX 3115 Milwaukee, WI 53201

Macys PO BOX 8218 Mason, OH 45040

Marcon Medical Partners c/o Certified Services Inc. 1300 N. Skokie Hwy, Suite 103A Gurnee, IL 60031

Medical Business Bureau LLC 1460 Renaissance Dr. Suite 400 Park Ridge, IL 60068

Nissan Motor Acceptance PO BOX 9001132 Louisville, KY 40290

Northwest Surgical

Northwest Surgical Specialists 3100 W. Higgins Rd, Suite 150 Schaumburg, IL 60195

Northwestern Medicine 28155 Network Place Chicago, IL 60673

Parkside Imaging, LTD 1550 Todd Farm Dr. Elgin, IL 60123

Physicians Immediate Care North Chi PO BOX 8799 Carol Stream, IL 60197

Radiological Consultants of Woodsto c/o Creditors Discount & Audit PO BOX 213
Streator, IL 61364

State Farm Bank PO BOX 2313 Bloomington, IL 61702

Synchrony Bank c/o Midland Funding LLC 2365 Northside Dr. San Diego, CA 92108

Synchrony Bank c/o Midland Funding LLC 2365 Northside Dr. San Diego, CA 92108